STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	15G393	A. BUILDING _____ B. WING _____	R 09/30/2011

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
DEVELOPMENTAL SERVICES INC	113 JENNINGS ST NORTH VERNON, IN 47265

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{W 000}	INITIAL COMMENTS This visit was for a 23 day follow-up survey to the post certification revisit which resulted in an immediate jeopardy identified on 9/06/11. Dates of Survey: September 29, and 30, 2011. Surveyor: Dotty Walton, Medical Surveyor III Facility Number: 000907 AIM Number: 100244410 Provider Number: 15G393 The following deficiencies reflect findings in accordance with 460 IAC 9. Quality Review completed 10/6/11 by Ruth Shackelford, Medical Surveyor III.	{W 000}		
{W 122}	483.420 CLIENT PROTECTIONS The facility must ensure that specific client protections requirements are met. This CONDITION is not met as evidenced by: Based on observation, record review and interview for 4 of 4 sampled clients (#1, #2, #3, and #4), and 4 additional clients (#5, #6, #7, and #8), the facility failed to meet the Condition of Participation: Client Protections. The facility failed to ensure the rights of all clients to be free of neglect, verbal, emotional and physical abuse by failing to address client #8's tantrums, property destruction, physical and verbal aggression. Findings include:	{W 122}		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

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{W 122}	Continued From page 1	{W 122}		

An Immediate Jeopardy was identified on 9/01/2011 at 5:40 PM that had existed at the facility since 9/01/2011 at 4:10 PM. The Agency Supervised Group Living Division Manager, was notified of the Immediate Jeopardy on 9/01/2011 at 5:50 PM. The facility offered a Plan of Action to remove the Immediate Jeopardy on 9/01/2011 at 8:45 PM which included the following:

I. "Immediate action taken:...no less than 2 staff members (sic.) be on duty any time [client #8] is present in the home until further notice.
Extra staff was arranged for overnight tonight 9/1/11. [Client #8] will be going home 9/2/11 after work and will not return until Monday afternoon 9/5/11. A second staff person has been scheduled for overnight shift starting again on 9/5/11 and will continue until further notice."

"Plan of Action to remove Immediate Jeopardy:

1. At least 2 staff will be on duty any time [client #8] is present in the home regardless of the number of other clients present.
2. All items with glass such as mirrors and picture frames will be removed from the common areas in the house until further notice.
3. Immediately upon [client #8] exhibiting cues of escalating anger and aggression such as yelling, cursing, stating she is upset, and making physical threats against self or others, one staff person will direct and ensure all other clients are moved to a safe area away from [client #8] and remain with them until all clam (sic.).
4. Immediately upon [client #8] exhibiting cues of escalating anger and aggression, cursing, stating she is upset, and making physical against self or others, second staff person will place themselves

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{W 122}	Continued From page 2 between [client #8] and other clients in the area and, then maintaining a safe distance from [client #8], began talking (sic.) calmly to her following the strategies outlined in her Behavior Support Plan. 5. If [client #8's] behavior becomes destructive and physically threatening to others and continues for more than 15 minutes QIDP/Qualified Intellectual Disabilities Professional/on call pager will be notified and 911 will be called. This applies to continuous aggressive behavior toward others. It does not apply to situations in which [client #8] is aggressive once but calms herself. 6. If [client #8's] destructive behavior is only directed toward her own property, staff should make no attempt to prevent this. Staff should ONLY intervene if her actions are causing harm to herself. If this destructive behavior continues without physical threats to herself or others for 45 minutes, staff will notify QIDP/on call pager and 911 will be called. Further action Planned: [Client #8's] psychiatrist has been contacted in regards to the increase and severity of her behavior. An appointment was requested but the doctor chose to order a new medication to be added to her current medications. Her guardian has given approval for this and HRC (Human Rights Committee) approval is being sought. IDT (interdisciplinary team) will meet as soon as possible to review current behaviors and revise Behavior Support Plan to address increase [client #8's] aggressive behavior.	{W 122}		

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[Group Living Division Manager] and [QIDP] will be responsible to ensure this plan is implemented and is successful in removing the risks to individuals."

Interview with staff #3 on 9/06/11 at 4:45 PM indicated QIDP/Qualified Intellectual Disabilities Professional #2 was on vacation and had not been at the facility since to offer training regarding the action plan. The interview indicated Group Living Division Manager #1 had been to the facility on 9/02/11 but staff #3 had been training staff on the action plan.

Observations were conducted at the facility on the evening of 9/06/11. At 5:14 PM on 9/06/11, client #2 was observed to touch client #8 on the left upper arm area as she returned to the kitchen area after setting a bowl of green beans on the table. Client #2 stated "leave me alone, stop arguing with me" and frowned at client #8 as she touched her. Client #8 was observed to frown and drew back her right hand making a fist toward client #2. Clients #1, #2, #3, #4, #5, #6, #7, and #8 were observed to have dinner at the facility at 5:15 PM. Staff #5 was observed to sit with clients #4 and #5. Staff did not sit at the table with clients #1, #2, #3, #6, #7 and #8. During bathing time on 9/06/11 at 6:30 PM, client #8 exhibited frustration while waiting for client #4 to be done with the bathroom. Staff #9 checked on client #4 and indicated to client #8 she would be done soon and to be patient. Staff #5 and #9 were observed to be in the facility's office area and staff #6 was in the accessible bathroom bathing client #3 at 6:40 PM. At 6:40 PM, client #8 was observed to open the bathroom door and expressed her frustration toward client #4, who

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{W 122}	Continued From page 4 was still in the bathroom. Phone interview with staff #6 on 9/07/11 at 7:55 PM indicated client #8 had another severe behavioral outburst on 9/06/11 after the surveyor left the facility. The interview indicated the police had been called owing to the unmanageable behaviors exhibited by client #8. Phone interview with staff #5 on 9/07/11 at 8:06 PM indicated client #8 had become upset at 8:15 PM on 9/06/11 and had thrown a lamp and an electronic keyboard in the facility's bedroom hallway. The client had pushed an easy type chair up the hallway toward the living area. Staff #6 had taken clients #1, #2, #4, #5, and #6 into clients #3 and #7's bedroom for safety. Clients #3 and #7 "were already in bed for the night in their room so the other clients were taken there for safety." The interview indicated client #8 tried to get into the clients' bedroom but did not. Interview with Group Living Division Manager/Administrator #1 on 9/08/11 at 11:00 AM indicated client #8 had severe behaviors on the evening of 9/06/11 and when staff #9 tried to intervene, the staff was punched in the eye. 911 was called according to the facility's Plan of Action of 9/01/11 and client #8 calmed herself. Group Living Division Manager/Administrator #1 was notified on 9/08/11 at 4:15 PM the Immediate Jeopardy was not removed due to the ineffectualness of the 9/01/11 Plan of Action and the failure to keep clients safe from physical, verbal and emotional abuse. II. The Group Living Division Manager/Administrator #1 offered a second Plan	{W 122}		

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for Removal of the Immediate Jeopardy on 9/22/11. It addressed the risk of physical aggression toward clients #1, #2, #3, #4, #5, #6, and #7 from client #8.

"Action taken:

The following actions were put in place between 9/1/11 and 9/22/11 in response to the continuing Immediate Jeopardy:

1. At least 2 staff will be on duty any time Client #8 is present in the home regardless of the number of other clients present until further notice. Line of sight supervision will be maintained for Client #8 until further notice.
2. All items with glass such as mirrors and picture frames will be removed from the common areas in the house until further notice.
3. Sharps, i.e. knives, scissors will be locked until further notice. Staff must supervise any use of sharp knives and must ensure these area cleaned immediately after use and returned to locked area.
4. Immediately upon Client #8 exhibiting cues of escalating anger and aggression such as yelling, cursing, stating she is upset, and making physical threats against self or others, one staff person will direct and ensure all other clients are moved to a safe area away from Client #8 and remain there until all is calm. QIDP (Qualified Intellectual Disabilities Professional)/on call pager will be notified as soon as possible.
QIDP/on call pager will arrange for additional support to report to the home.
5. Immediately upon Client #8 exhibiting cues of escalating anger and aggression such as yelling, cursing, stating she is upset, and making physical

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against self or others, second staff person will place themselves between Client #8 and other clients in the area and, maintaining a safe distance from Client #8, began talking (sic.) calmly to her following the strategies outlined in her Behavior Support Plan.
6. Should Client #8 become physically aggressive to others, including hurting herself, staff should move into the position for the transport position. Staff should maintain Client #8 in this position with one staff talking to her calmly. Once Client #8 appears to be responsive to staff without physical aggression staff should release her from the transport position. Staff should reengage the transport position should Client #8 become physically aggressive again. As soon as possible, this should be reported to the QIDP/on call pager.
7. If Client #8's physically aggressive behavior continues for more than 15 minutes QIDP/on call pager will be notified and decision will be made regarding calling 911. This applies to continuous aggressive behavior toward others. It does not apply to situations in which Client #8 is aggressive once but calms herself.
8. If Client #8's destructive behavior is only directed toward her own property, staff should make no attempt to prevent this but should ensure that all other clients remain in a safe place. Staff should ONLY intervene if her actions are causing is plan harm to herself or she is physically aggressive towards others. Should this occur follow directions indicated above in #5.
9. Locks were placed on the bedroom doors with each housemate having a key to their own room.
10. The IDT (Interdisciplinary team) met on 9/16/11 to review the Functional Behavioral Analysis and Behavior Support Plan (BSP). The

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question of appropriate placement was discussed. The team feels Client #8 is appropriately placed on most levels. Agreement was made to implement the BSP and review again in six weeks.
11. A Behavior Support Plan has been developed and is attached. All staff were trained on this plan on 9/19/11.
12. A separate bedroom had been constructed for Client #8 as of 9/21/11. This room is not located in the same hall as the other client bedrooms.
13. An appointment has been scheduled for 9/28 with a new psychiatrist."

Observations were conducted of clients #1, #2, #3, #4, #5, #6, #7, and #8 at the facility on 9/29/11 from 2:30 PM until 6:35 PM.
Observations were conducted of clients #2, #3, #4, #5, #6, #7, and #8 at the facility on 9/30/11 from 2:30 PM until 6:10 PM. Three direct care staff were observed to be with the clients which included a one on one staff with line of sight to client #8. New behavioral (antipsychotic and antianxiety) medications were observed to be delivered to the facility for client #8 on 9/29/11 at 4:00 PM. The observations indicated clients #1, #2, #3, #4, #5, #6, #7, and #8 had keys to their bedroom doors and knew how to use them. Sharps (knives/scissors) were observed to be in a secure location and used with supervision by staff. Client #8 was observed to have a private bedroom.

Client #8's record and the facility's 9/22/11 plan of action were reviewed on 9/29/11 from 2:30 PM until 6:00 PM. During the observation period (9/30/11 from 2:30 PM until 6:10 PM) the facility's 9/22/11 plan of action was reviewed. Facility staff

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{W 122}	Continued From page 8 time sheets for 9/22/11 though 9/28/11 were reviewed on 9/29/11 at 4:25 PM and indicated at least two staff were on duty at the facility on a 24 hour basis. Client #8's behavior had been assessed by a behavioral consultant on 9/16/11 and a behavior plan had been written on 9/16/11. Facility staff had been inserviced on 9/19/11 regarding the client's new plan. The behavior plan had been revised on 9/29/11 after client #8 saw a new psychiatrist on 9/28/11. The psychiatrist recommended medication changes on 9/28/11. The necessary approvals (guardian and human rights committee) were obtained on 9/28/11 and 9/29/11. Administrative staff #1 retrained direct contact staff on 9/28/11, 9/29/11 and 9/30/11 regarding client #8's behavior plan and medication changes. The new medications were implemented on 9/29/11 at 8:00 PM. Administrative staff #1 and direct contact staff #5, #6 and #13 were interviewed during the observation periods from 2:20 PM until 6:35 PM. Administrative staff #1 and direct contact staff #5, #6, #13 and #14 were interviewed during the observation period on 9/30/11 from 2:30 PM until 6:10 PM. The interviews indicated the staff had been trained on client #8's behavior plan, medications and the facility's 9/22/11 plan of action. The interviews indicated client #8 took her new medication on 9/29/11 at 8:00 PM without incident. The Immediate Jeopardy was removed on 9/30/11 at 6:10 PM through observation, interview and record review. It was determined the facility had implemented their 9/22/11 plan of action to remove the Immediate Jeopardy, and the steps taken had removed the immediacy of the	{W 122}		

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{W 122}	Continued From page 9 problem. While the Immediate Jeopardy was removed 9/30/11, the facility remained out of compliance at the Condition level of Client Protections in that the facility needed to continue implementing its plan of removal to ensure its ongoing effectiveness for ensuring the rights of all clients to be free of neglect, verbal, emotional and physical abuse. 9-3-2(a)	{W 122}		